COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

ATTORNEY DOCKET NO. 905-185P

PLEASE NUIL:
YOU MUST
COMPLETE THE
FOLLOWING:
_

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one

	inventor is named below) or a subject matter which is claim	an original, first and joint ed and for which a patent	inventor (if plural inventors ar is sought on the invention entit	re named below) of the tled:*				
Insert Title		M AND REPRODUCT						
Check Box If Appropriate -								
For Use Without Specification	the specification of which is attached hereto unless the following box is checked:							
Attached	was filed on as United States Application Number or							
	States Application Nur PCT International App	nber	or					
	and was amended on _	meation rumber		(if applicable).				
	I hereby state that I have reviewed and understand the contents of the above identified specification,							
	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.							
	I do not know and do not believe the same was ever known or used in the United States of America							
	before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, that the same was not in public							
	use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application							
4	in any country foreign to the United States of America on an application filed by me or my legal							
	representatives or assigns mor	e than twelve months (six	c months for designs) prior to the	his application, and that				
	United States of America pri follows.	or to this application by	s invention has been filed in any me or my legal representative	s or assigns, except as				
	I hereby claim foreign p	riority benefits under Titl	le 35, United States Code, §119	(a)-(d) of any foreign				
	application(s) for patent or investigation for patent or investigation	nventor's certificate liste entor's certificate having	d below and have also identif a filing date before that of the	ied below any foreign				
64 8 81	priority is claimed:	g	a ming data solote man of an	s application on which				
 =	Prior Foreign Application(s) Japanese Patent Appln.			Priority Claimed				
Insert Priority	No. 7-237876 (Number)	Japan	Month/Day/Year Filed)					
ff appropriate)	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
T.	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
ē	(Number)	(Country)	(M- at 0) - 0/ - Fil - 1)					
	(radiiber)	(County)	(Month/Day/Year Filed)	Yes No □ □				
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)	(Month/Day/Year Filed)					
	,	(Country)	•	Yes No				
	I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.							
	(Application Number)		(Filing Date)					
	ZA - Novin N		·					
	(Application Number) (Filing Date)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6 Months for Designs) Prior To The Filing Date of This Application:							
	Country Application No. Date of Filing (Month/Day/Year)							
								
•	The deal Co. 1. True Of W. 1. 10							
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the							
	prior United States application in the manner provided by the first paragraph of Title 35, United States Code,							
	§112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application							
	and the national or PCT intern	national filing date of this	application:	- ••				
	(Application Number)	(Filing D	ate) (Status — patente	ed, pending, abandoned)				
*NOTE: Must be completed.			,					
Page 1 of 2	(Application Number)	(Filing D	ate) (Status — patente	ed, pending, abandoned)				

I hereby apposite following attorneys to prosecute application and/or an international application based on his application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	<i>,</i>	,					
Full Name of First or Sole Inventor: Insert Name of Inventor	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	and a	DATE* July 16,		
Insert Date This Document Is Signed	NOTIFIED TANEBA 1/00000 10000 1770						
Insert Residence	Residence (City, State & Country)						
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II	11-46, Senzui 3-chome, Asaka-shi, Saitama 351, Japan						
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	POST OFFICE ADDRE	SS (Complete Street Addres	s including City, State & Country)				
Full Name of Third Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above					<u> </u>		
	Residence (City, State & Country) CITIZENSHIP						
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see above							
	Residence (City, State	& Country)		CITIZENSHIP			
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above				Tain-11	<u> </u>		
	Residence (City, State	& Country)		CITIZENSHIP			
*Note: Must be completed — date this document is signed.	POST OFFICE ADDRI	ESS (Complete Street Addre	ss including City, State & Country)				
Page 2 of 2							